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United States Patent and Trademark Office Examiner: David S. Romeo Art Unit: 1647	(703) 308-1202 (571) 272-0890	(703) 872-9306

From : Stephen E. Reiter *SR*

Date : May 24, 2004

Client/Matter No : 068904-0302

User ID No : 1877

## MESSAGE:

Re: U.S. Patent Application No. 09/005,318  
Our Ref.: EPI3004B (068904-0302)

Attached please find:

- Notice of Appeal (2 pgs.); *Duplicate Copy Attached*
- Notice of Appeal Fee;
- Request for two-months extension of time;
- Authorization to charge Deposit Acct. No. 50-0872 in the amount of \$375.00.

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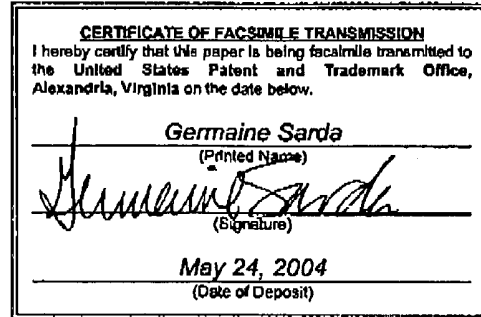
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Atty. Dkt. No. EPI3004B  
(068904-0302)

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Applicant: Mitch B. Hein et al.  
Title: NOVEL EPITHELIAL TISSUE  
TARGETING AGENT  
Appl. No.: 09/005,318  
Filing Date: 1/9/1998  
Examiner: D. Romeo  
Art Unit: 1646  
Confirmation 2353  
No.:



**NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD  
OF PATENT APPEALS AND INTERFERENCES**

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Applicant hereby appeals to the Board of Patent Appeals from the decision of the final rejection dated December 22, 2003, of the Examiner finally rejecting Claims 42-70.

☒ Applicant claims small entity status.

☒ Applicant hereby petitions for an extension of time under 37 C.F.R. §1.136(a) for the total number of months checked below:

☒ Notice of Appeal Fee

☒ To be paid as detailed below

Atty. Dkt. No. EPI3004B  
(068904-0302)

The required fees are calculated below:

<input checked="" type="checkbox"/>		Notice of Appeal Fee	\$330.00
<input checked="" type="checkbox"/>	Extension for response filed within the second month:		\$420.00
<input type="checkbox"/>	Extension:		\$0.00
	FEE TOTAL:		\$750.00
<input checked="" type="checkbox"/>	Small Entity Fees Apply (subtract 1/2 of above):		\$375.00
	TOTAL FEE:		\$375.00


☒ Please charge Deposit Account No. 50-0872 in the amount of \$375.00 . A duplicate copy of this transmittal is enclosed.

☒ The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 50-0872. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 50-0872.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date May 24, 2004

By 

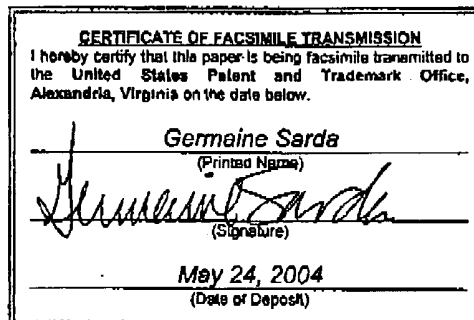
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Stephen E. Reiter  
Attorney for Applicant  
Registration No. 31,192

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